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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) <div style="text-align: right;">564462006600</div>	
<div style="border-bottom: 1px solid black; margin-bottom: 5px;">In re Application of Mark MADDEN et al.</div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> <div style="width: 60%;">Application Number 09/751,299</div> <div style="width: 40%;">Filed December 28, 2000</div> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">For METHODS FOR PRODUCING ALPHA-SUBSTITUTED CARBOXYLIC ACIDS USING NITRILASES AND STRECKER REAGENTS (AS AMENDED)</div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black;"> <div style="width: 60%;">Art Unit 1656</div> <div style="width: 40%;">Examiner Chih-Min Kam, Ph.D.</div> </div>			
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ 500.00</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ 250.00</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>03-1952</u> I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.</p> <p><input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p> <p>I am the</p> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <input type="checkbox"/> applicant /inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>38,440</u> <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____ </div> <div style="width: 40%; text-align: center;"> <div style="border-top: 1px solid black; margin-bottom: 10px;">/Gregory P. Einhorn/ Signature</div> <div style="border-top: 1px solid black; margin-bottom: 10px;">Gregory P. Einhorn Typed or printed name</div> <div style="border-top: 1px solid black; margin-bottom: 10px;">(858) 720-5133 Telephone number</div> <div style="border-top: 1px solid black;">June 29, 2007 Date</div> </div> </div> <p><small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</small></p>			
<input checked="" type="checkbox"/> *Total of <u>1</u> forms are submitted.			